

16623 U.S. PTO
09/22/03

PTO/SB/17 (10-01)

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<h1 style="text-align: center;">FEE TRANSMITTAL</h1> <h2 style="text-align: center;">for FY 2003</h2> <p style="text-align: center;"><i>Patent fees are subject to annual revision</i></p>		<i>Complete if Known</i>	
		Application Number	Unknown
		Filing Date	September 22, 2003
		First Named Inventor	Joseph Birli
		Examiner Name	Unknown
		Group Art Unit	Unknown
TOTAL AMOUNT OF PAYMENT		(\$) 393.00	
		Attorney Docket No.	24063/04051

17513 U.S. PTO
10/667995

092203

METHOD OF PAYMENT				FEE CALCULATION (continued)			
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit Account Number: 03-0172 Deposit Account Name: Calfee, Halter & Griswold, LLP <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27				3. ADDITIONAL FEES			
2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other							
FEE CALCULATION							
1. BASIC FILING FEE							
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid		
101	750	201	375	Utility filing fee	375.00		
106	330	206	165	Design filing fee			
107	520	207	260	Plant filing fee			
108	750	208	375	Reissue filing fee			
114	160	214	80	Provisional filing fee			
SUBTOTAL (1)					375.00		
2. EXTRA CLAIM FEES							
Total Claims		22		Extra Claims	-20 = 2	Fee from below	x 9 = 18.00
Independent Claims		3			-3 = 0	x 42	= 0-
Multiple Dependent Claims							= 18.00
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description			
103	18	203	9	Claims in excess of 20			
102	84	202	42	Independent claims in excess of 3			
104	280	204	140	Multiple dependent claim, if not paid			
109	84	209	42	** Reissue independent claims over original patent			
110	18	210	9	** Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2)					18.00		
				** or number previously paid, if greater; For Reissue, see above			
				* Reduced by Basic Filing Fee Paid			
				SUBTOTAL (3) -0-			

The PTO did not receive the following listed item(s) *7/22/05 sent to [unclear]*

SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	Paul E. Szabo	Registration No. (Attorney/Agent)	30,429	Telephone	(216) 622-8578
Signature	<i>Paul E. Szabo</i>	Date	September 22, 2003		

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